

p. m. in Lane Hall, Sacramento Street corner of Webster, San Francisco. The lecture will be illustrated with lantern slides. All members of the profession and medical students are cordially invited to attend.

Noted Viennese Visits U. C. Campus—Sigmund Fraenkel, professor of medical chemistry at the University of Vienna, who has come to America to deliver a series of lectures before medical research groups, is stopping his tour for a month to carry on some research work in the laboratories of the University of California in collaboration with Professor Herbert M. Evans of the anatomy department.

While in Berkeley, Professor Fraenkel will deliver a series of five public lectures on the theory of synthetic remedies, on November 21, 23, 28 and 30, and December 2, in room 110 of Wheeler Hall.

Professor Fraenkel has had a distinguished career, especially in the relations of organic chemistry to medicine. As a young man he worked with such noted authorities as Eugen Baumann, Oswald Schmiedeberg and Franz Hofmeister in biochemistry and pharmacology. He has written a book which has now gone into a sixth edition, because it is the only important and comprehensive text in its field.

He is an outstanding authority on the relation of the chemical make-up of substances to their action on living tissue. The important phase of his work is an attempt to develop synthetic organic chemicals which have an ideal action on living tissue for definite purposes, such as local anesthesia or relief of pain.

His chief work has been on the chemistry of proteins; on the chemistry of nervous, especially brain, tissue; on the chemistry of vitamins, especially a method for the quantitative determination of vitamin B, and on the chemistry of the internal secretions of the endocrine glands, in which field he is now working with Doctor Evans.—*U. S. Clip Sheet*, November 22, 1927.

MEDICAL ECONOMICS

State to Care for Crippled Children—The following extract from the Crippled Children Act of 1927 indicates the scope of the work to be undertaken by the California Department of Public Health in the care of crippled children:

"The State Department of Public Health shall have the power and it shall be its duty to seek out needy physically defective or handicapped persons under the age of eighteen years by local surveys arranged through local lawful authorities, social welfare and other public and private agencies; provided, that no record shall be taken and/or kept except of such children as are specified in this section.

"It shall likewise have the power and it shall be its duty to arrange through such local agencies for local public diagnostic clinics or conferences for such physically defective and handicapped persons, when and where it shall appear necessary and bring to such persons expert diagnoses near their own homes.

"Whenever the parents or guardian of any such physically defective or handicapped person shall be unable, in whole or in part, to furnish for such child or ward, resident of the state, necessary surgical, medical, hospital, physiotherapy, occupational therapy and other service, special treatment, materials, appliances and their upkeep, maintenance, care and transportation, the parents or guardian may petition the Superior Court of the county wherein such parents or guardian is or are resident for a certificate setting forth such fact, and if the judge is satisfied that the parents or guardian is or are unable, in whole or in part, to furnish such services, treatment, materials, or appliances and their upkeep, or such maintenance, care and transportation, he shall issue a certificate to

that effect. Such certificate shall be presented to the State Department of Public Health and it shall be its duty to furnish, in whole or in part, such services, transportation, materials, or appliances and their upkeep, such maintenance, care and transportation as in its judgment are necessary and proper, the expense thereof to be advanced by the State Department of Public Health out of a revolving fund appropriated for that purpose. Provided, however, that the State Department of Public Health may pay the same out of any funds received by it through gift, devise, or bequest, without the possession of such certificate. All moneys expended under the authority of such certificate, as herein provided, shall constitute a legal county charge against the county from which such certificate is issued. Upon presentation to the Board of Supervisors of the county in which such certificate was issued, of an itemized claim, duly sworn to by the secretary of the State Department of Public Health, for the expense of the above set out services, transportation, materials, appliances and their upkeep, care and maintenance and furnished under the authority of said certificate, said Board of Supervisors shall audit and approve said claim, and the county auditor of said county, shall thereupon issue a warrant for the amount thereof payable to the State Department of Public Health, and the county treasurer shall pay the same."—*Weekly Bulletin*, California Department of Public Health.

New Orleans Legislature Limits Service of County Hospital to Indigent Poor—The last legislature passed an act which gave the New Orleans Charity Hospital the right to give free medical service to only those unable to pay for it, thereby attempting to stop an abuse which has existed since the foundation of this institution. That the physician should be exploited for the power that he had become so well an established custom in Louisiana that it led some to publish what they considered an economic fact, viz., that it was cheaper to give applicants medical attention without questioning their ability to pay than to investigate. The objectors probably either had the idea that the population as a whole was poverty stricken, or a groceryman should give credit to everyone, if he wants to be successful financially.—*Western Medical Times*.

Recent Legislation Concerning Establishment of County Hospitals—During the last session of the Florida Legislature, Senate Bill No. 10 was passed and approved by the governor on April 23, 1927. This is an act which enables certain counties to establish county hospitals. It affects only those counties which showed a population of from thirty to sixty thousand inhabitants according to the 1925 census. These counties are Alachua, Escambia, Jackson, Orange, Palm Beach, Pinellas, and Volusia.

The bill specifies that the Board of County Commissioners shall submit the question to a vote when petitioned by five hundred voters from that county. Bonds may also be voted and a tax assessed for the support and maintenance of the County Hospital. The act provides for the creation of a board of hospital trustees and specifies their duties.

The provisions of the act designate the hospitals as institutions to take care of both charity and pay patients.

The attention of the medical societies in the counties affected by this act is directed to the provisions. It is suggested that the matter be discussed at the meetings of county medical societies with the view of determining the need of such an institution in their counties.

Palm Beach has already organized and plans to have a County Hospital if a bond issue can be obtained at the next election. Any support that can be given to this project by organized medicine will doubt-

less repay the effort many times over through the increased conveniences and added facilities for proper medical care of private patients.—*J. Florida M. A.*

Predicting Epidemics of Plague in the Punjab—When plague is at its peak in the Punjab there is little recourse to anything besides vaccination to reduce the mortality. Vaccination being voluntary there is no demand for it except when there is an epidemic, and then the demand is proportionate to the gravity of the epidemic. The table below compares the monthly data relative to vaccinations for 1925 (year in which there was a moderate epidemic) with the corresponding figures for 1926 (year of severe epidemic). The figures in parentheses represent the monthly mortality.

Comparison of monthly vaccinations with monthly mortality (mortality figures in parentheses):

	Jan.	Feb.	Mar.	Apr.
1925	43,729 (4,455)	51,480 (5,093)	70,281 (10,040)	60,961 (11,885)
1926	33,558 (2,660)	61,943 (7,285)	99,117 (19,678)	222,999 (34,739)

As the mortality for April varies between 195,000 (1907) and 651 (1921), it is evident that the demand for antiplague vaccine fluctuates considerably. But antiplague vaccine as furnished by the Haffkine Institute requires four or five months for preparation and maturation, for the reaction caused by the inoculation of immature vaccine is severe enough to make it preferable not to use it at that stage.

Antiplague vaccine should be ordered at least four months in advance, or that needed during the epidemic period—March, April, and May—should be estimated in November of the preceding year. An estimate too low would be distressing, and one too high would be financially burdensome, for the vaccine costs \$4000 per 100,000 doses. From this point of view alone the prediction of epidemics of plague is of considerable practicable importance.—*Pub. Health Rep.*

Report of the Committee on Insurance—The committee appointed at the meeting of the council of the Massachusetts Medical Society held October 5, 1927, to consider malpractice insurance of Fellows of the society has the following report to make:

In 1921 a blanket insurance policy against suits for malpractice, as issued by the United States Fidelity and Guaranty Company, was endorsed by vote of the council. In 1923 this group policy was given up and the same company issued individual policies for members only of the Massachusetts Medical Society. During these six years the company has satisfactorily handled nearly three hundred claims, all but a few of which were settled out of court. Of those suits that went to trial all were so well conducted that only one was lost. From the standpoint of the Massachusetts Medical Society and the individual members thereof the service rendered has been most gratifying.

From the viewpoint of the United States Fidelity and Guaranty Company, however, the experience has not been so satisfactory. The number of suits against physicians for malpractice has increased annually by geometrical progression until conditions at present are little short of alarming. A careful tabulation of claims settled shows that the company cannot continue to issue policies at the present rate. The same tables show that certain specialists in medicine are more liable to suits than are general practitioners. In order to meet changing conditions the company proposes, therefore, to equalize the burden and to proportion the cost of liability insurance by doing away with flat rate policies and issuing in their stead policies of unequal premiums varying according to the risks attached to different specialties.—*Boston M. and S. J.*

TWENTY-FIVE YEARS AGO *

EXCERPTS FROM OUR STATE MEDICAL JOURNAL

From Volume 1, No. 2, December, 1902

From an article on "Pharmaceutical Standardization":

... A United States Senator, some years ago, when approached on the subject, stated that the medical and pharmaceutical professions could obtain any legislation they really wanted, if they were sure that they wanted it and acted as a concerted whole. Lack of organization has heretofore prevented any action looking toward the remedy of the present evils. . . .

From an article on "Organization Progressing":

... It is within our own personal knowledge that, whereas the sale of liquors, or even such harmless stuff as beer with its 2 per cent of alcohol, is prohibited amongst the Indians, various "patent" medicines are freely sold—and some of them contain as much as 44 per cent of alcohol. The spirit of medical progress is toward prevention—prophylaxis; yet, as the laws now stand, nothing can be done to touch the majority of these traders in lives. A thoroughly organized medical profession could wield an enormous influence; it could see to it that such men were elected to office as would promptly take action in the matter and force the faker out of business. . . .

From an article on "An Obvious Duty Before Wedlock":

... Let both contracting parties to a marriage thoroughly understand their marital and sexual obligations, the one toward the other; and if their parents have not sense nor courage enough to enlighten them, then let the "good old family doctor" step in and tell them what they should know. . . .

From an article on "Affiliation of the County Societies":

... The few county medical societies in the state that have not as yet organized under or complied with the provisions of the State Society for affiliation should do so without delay. . . .

... Formerly any medical society that adopted the Code of Ethics of the American Medical Association was considered in affiliation with that body and could elect delegates to it; now the conditions are altered. Organization is the only path for the regular physicians of the country to tread, and there must be no faltering, no backward tendency, no hesitation, no dragging up of old fights and petty squabbles. . . .

From an editorial on "A California Doctor to be Governor":

A majority of the electors of this state have placed their interests in the hands of a gentleman than whom no man in the ranks of the medical profession has shown a greater regard for strict medical ethics. Doctor Pardee has been a member of the State Society for many years and has shown much interest in its meetings and its aim; he has been in close touch with its members and has the respect of all and the love of many. The position in which he will be placed as Governor of California will be, to say the least, somewhat trying. . . .

From an editorial on "The Bubonic Plague Situation":

There are two equally important points from which the residents of the Pacific Coast states view the

* Through this "Twenty-Five Years Ago" column, it is hoped to familiarize colleagues who in more recent years have joined the California Medical Association, concerning the activities and work of our state association, and of members who were active in the period two decades and a half remote. For older colleagues who were members twenty-five years ago, it has been thought that the references may recall incidents and associations which may be of interest or pleasure to momentarily dwell upon. To know what our predecessors fought for and accomplished should make for increased loyalty to the traditions and objects of our organization.